



PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Attorney Docket No. 72167.000125																								
<p>In re Application of <i>Andrea Concannon et al.</i> Application Number 09/438,590 Filed 11/12/1999 For System and Method for Processing Foreign Currency Payment Instructions Group Art Unit 3628 Examiner Jennifer L. Liversedge Confirmation No. 9576</p> <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above-identified application.</p> <p>The requested extension and appropriate fee is as follows:</p> <table><thead><tr><th></th><th>Large Entity</th><th>Small Entity</th><th>Amount</th></tr></thead><tbody><tr><td><input type="checkbox"/> One Month</td><td>\$120.00</td><td>\$ 60.00</td><td>\$</td></tr><tr><td><input checked="" type="checkbox"/> Two Month</td><td>\$450.00</td><td>\$ 225.00</td><td>\$450.00</td></tr><tr><td><input type="checkbox"/> Three Month</td><td>\$1020.00</td><td>\$ 510.00</td><td>\$</td></tr><tr><td><input type="checkbox"/> Four Month</td><td>\$1590.00</td><td>\$ 795.00</td><td>\$</td></tr><tr><td><input type="checkbox"/> Five Month</td><td>\$2160.00</td><td>\$1080.00</td><td>\$</td></tr></tbody></table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 50-0206. A duplicate of this sheet is attached.</p> <p>I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).; <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p><u>December 19, 2006</u> _____</p> <p>Date _____ Signature _____</p> <p>Ozzie A. Farres _____</p> <p>Typed or Printed Name _____</p> <p>43,606 _____ Registration Number (if applicable)</p> <p>Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*</p> <p><input checked="" type="checkbox"/> *Total of <u>1</u> form(s) is/are submitted.</p>				Large Entity	Small Entity	Amount	<input type="checkbox"/> One Month	\$120.00	\$ 60.00	\$	<input checked="" type="checkbox"/> Two Month	\$450.00	\$ 225.00	\$450.00	<input type="checkbox"/> Three Month	\$1020.00	\$ 510.00	\$	<input type="checkbox"/> Four Month	\$1590.00	\$ 795.00	\$	<input type="checkbox"/> Five Month	\$2160.00	\$1080.00	\$
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36284

**FEET TRANSMITTAL**

For FY 2005

MAIL STOP AF Applicant claims small entity status. See 37 CFR 1.27**Total Amount Of Payment (\$)** **\$450.00**

<i>Complete If Known</i>	
Application No.	09/438,590
Filing Date	November 12, 1999
First Named Inventor	Andrea Concannon et al.
Examiner Name	Jennifer Liversedge
Art Unit	3628
Attorney Docket No.	72167.000125

METHOD OF PAYMENT (check all that apply)
 Check Credit Card Money Order None Other (identify): _____

 Deposit Account Deposit Account Number **50-0206** Deposit Account Name : **Hunton & Williams LLP**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Charge fee(s) indicated below. | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input type="checkbox"/> Credit any overpayments. |

FEE CALCULATION**1. BASIC FILING, SEARCH AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Fee(\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee(\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee(\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	300.00	150.00	500.00	250.00	200.00	100.00	
Design	200.00	100.00	100.00	50.00	130.00	65.00	
Plant	200.00	100.00	300.00	150.00	160.00	80.00	
Reissue	300.00	150.00	500.00	250.00	600.00	300.00	
Provisional	200.00	100.00	0.00	0.00	0.00	0.00	

2. EXCESS CLAIMS FEES

<u>For</u>	<u>Number Present</u>	<u>Highest Number Paid For</u>	<u>Extra</u>	<u>Small Entity Fees (\$)</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>
Total Claims	13	20	0x	50.00	25.00	
Independent Claims	2	3	0 x	200.00	100.00	
Multiple Dependent Claim				360.00	180.00	

Total Excess Claims Fees

3. APPLICATION SIZE FEE (if the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).)

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>No. of Each Additional 50 or Fraction Thereof</u>	<u>Fees (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fees Paid (\$)</u>
_____ - 100 =	0 / 50 =	(round up to a whole number) x	250.00	125.00	

4. OTHER FEE(S)

- | | | |
|--|----------|---|
| <input type="checkbox"/> Non-English Specification (no small entity discount) | 130.00 | <input type="checkbox"/> Utility Issue Fee (or Reissue) (including Publication Fee, if necessary) |
| <input type="checkbox"/> Surcharge - late filing fee or oath | | <input type="checkbox"/> Design Issue Fee |
| <input type="checkbox"/> Surcharge - late provisional filing fee or cover sheet | | <input type="checkbox"/> Plant Issue Fee |
| <input checked="" type="checkbox"/> Two Month Extension of Time | \$450.00 | <input type="checkbox"/> Petition to Commissioner |
| <input type="checkbox"/> Submission of Information Disclosure Statement | | <input type="checkbox"/> Petition to Revive (Unavoidable) |
| <input type="checkbox"/> Notice of Appeal | | <input type="checkbox"/> Petition to Revive (Unintentional) |
| <input type="checkbox"/> Request for Oral Hearing | | <input type="checkbox"/> Petitions Related to Provisional Applications |
| <input type="checkbox"/> Filing Brief in Support of Appeal | | <input type="checkbox"/> Recording Each Patent Assignment Per Property |
| <input type="checkbox"/> Filing Submission After Final Rejection (RCE - Transmittal) | | <input checked="" type="checkbox"/> Other (specify) _____ |

SUBMITTED BY

Signature		Registration No.	43,606	Telephone	202.955.1923
Typed or Printed Name	Ozzie A. Farres			Date	12/19/06